

The Ultimate Guide to FTM Top Surgery



Introduction to Gender Incongruence

You may have heard the term “gender incongruence” or “gender dysphoria” in conversations about trans people—but how much do you know about what it is, what causes it, and whether it describes how you move through life? We want to give you a clear guide to help you understand it, whether you’re the one experiencing it, or you need to support someone who is.

What are gender incongruence and gender dysphoria? How are they different?

They are two different terms that mean the same thing. The main difference is that dysphoria is used as a medical term for dissatisfaction with life because that’s what it’s called in the Diagnostic and Statistical Manual of Mental Disorders ([DSM-V](#)). It replaced the stigmatized and inaccurate term “gender identity disorder.”

Simply put, incongruence is a medical condition in which the sex a person was assigned at birth does not match their gender, and that incongruity causes them a great deal of mental and emotional distress.

How is gender dysphoria treated?

There’s no one perfect course of treatment—it all depends on the individual and what they and their healthcare team decide is best. You may find that

dressing and behaving according to the norms of your true gender is enough to give you relief. You may find that therapy helps you. You may decide to medically transition through hormones, “top” surgery, and/or “bottom” surgery. You might seek out [laser hair removal](#), voice coaching to raise or lower your voice to some extent, or cosmetic services like hair styling, manicures, eyelash extensions, or facial cosmetic surgery to bring your body more in line with your true self. Most trans people choose a mix of approaches.

What is Female-to-Male (FTM) Top Surgery?

Top Surgery is the reconstructive surgery performed to alter the chest size, shape, and appearance. This surgery is typically performed by a plastic surgeon that has specific training in transgender or gender-affirming surgeries.

Although top surgery which is used to reduce or remove breast tissue is often referred to as female-to-male (FTM), surgeons are moving more and more away from that, because it implies gender change rather than **affirming the patient’s true gender**. More recently, it’s also been referred to as transgender mastectomy, masculinizing chest reconstruction, chest re-sculpting, or simply the catchall **“top surgery.”** Regardless of your gender, you can have the silhouette you’ve dreamed of, without binding.

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It's important to do plenty of research before you embark on your journey, not just to understand the risks and requirements of top surgery, but to learn about the different types of incisions available and find out which one is best for your body type.

Types of Incisions

What Are the Types of Incisions for Masculine Top Surgery?

There are several different techniques for performing top surgery. They vary according to where the incisions are made, whether the nipple and areola are reduced and/or repositioned, and how much sensation is preserved.

Two of the most common types of incisions are **periareolar** and **double incision**, both of which we offer our patients. Others include inverted-t and minimal scar. Our top surgery techniques are ones that provide a good option for every breast size and shape. Keyhole surgery, for example, is only appropriate for a small percentage of patients who already have very small breasts.

- **Periareolar surgery** creates an incision around the nipple and areola, and then another incision in a concentric circle a couple of inches away from the nipple. The skin between the incisions is removed. The surgeon can then access your glandular tissue from that small open area. The areola is reduced by reconnecting skin to the areola using the purse string method. The nipple stalk is left intact and the nipple sensation is preserved.
- **Double incision surgery** creates horizontal incisions at the top and bottom of the pectoral muscle to allow for tissue removal. The nipple stalk and nerves must be severed so that the nipple and areola can be repositioned and grafted into place, resulting in loss of erotic sensation but will maintain touch sensation. The skin is reconnected at the bottom of the pectoral muscle, usually resulting in two horizontal scars.

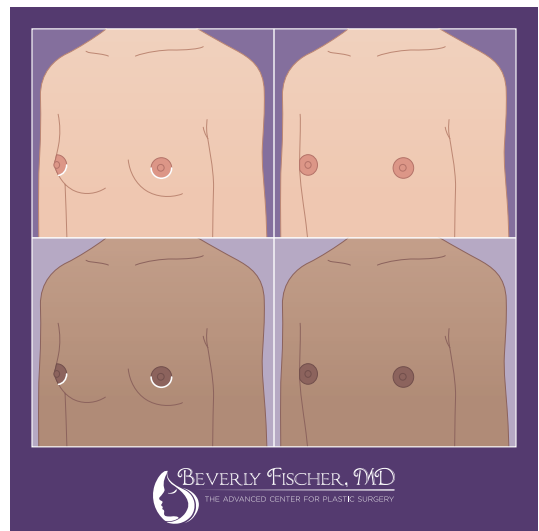
While you might be thinking that you have a clear preference for one type over the other, let's look at how to approach this decision.

Which Type of Chest Re-Sculpting Suits Your Body?

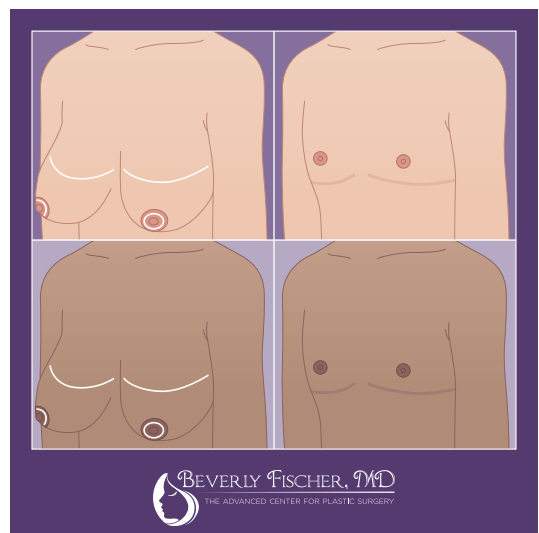
The biggest factor to consider in choosing your top surgery is the size of your chest. Small- to moderately-sized chests, particularly those with good elasticity,

do very well with periareolar surgery. Larger-chested individuals usually require double incision, and people with moderately-sized chests, but less elasticity in their skin, may also see better results with double incision.

If you fall into one of those gray areas where you might be able to go either way, the best thing to do is to schedule a consultation with your doctor to talk through your expectations, your body's needs, and your surgical history.



**PERIAREOLAR SURGERY
BEFORE (LEFT) AND AFTER (RIGHT)**



**DOUBLE INCISION SURGERY
BEFORE (LEFT) AND AFTER (RIGHT)**

FTM Top Surgery Cost

How much does FTM Top Surgery Cost?

FTM Top surgery cost varies, and is based partially on the type of surgery you need. The final cost of your surgery includes everything from your pre-operative appointment, to your anesthesia and surgery, to your follow-up appointments, and even the compression garment that you'll wear during recovery.

Think about the cost, not just in terms of what services are included, but in terms of overall quality. Dr. Fischer is recognized as one of the top gender affirmation specialists in the country due to her skill, her passion for her patients and their quality of life, and the exceptionally high standards she maintains for her work, as well as every aspect of her practice and every step of your journey.

Less expensive procedures may mean less-skilled surgeons or staff, less thorough care, a limited understanding of transgender patients' needs, and the risk of scarring, asymmetry, or other complications.

Is top surgery covered by insurance?

Most insurance companies cover top surgery. A number of insurers have exclusions for surgeries and treatments specific to gender affirmation, classifying them as "elective." Some insurance companies will reimburse money towards the surgery, but there are stipulations and each insurance company is different. There are many regulations based on age, length of time on testosterone, length of time living as a male. There will be requirements of multiple letters from

multiple therapists stating you are of sound mind, good judgment, suffer from dysphoria, have a good support system after surgery, and understand that the surgery is medically necessary. Many non-binary clients are unable to fit into many of these categories.

At the Advanced Center for Plastic Surgery, we offer CareCredit, which is exclusive to health care services, as a financing option to make it easier for you to afford your procedure. We'll also work with you on pricing plans and financing.

At ACPS, each patient will have a treatment plan mapped out for them that suits their individual needs and wants. Your comfort is our top priority.



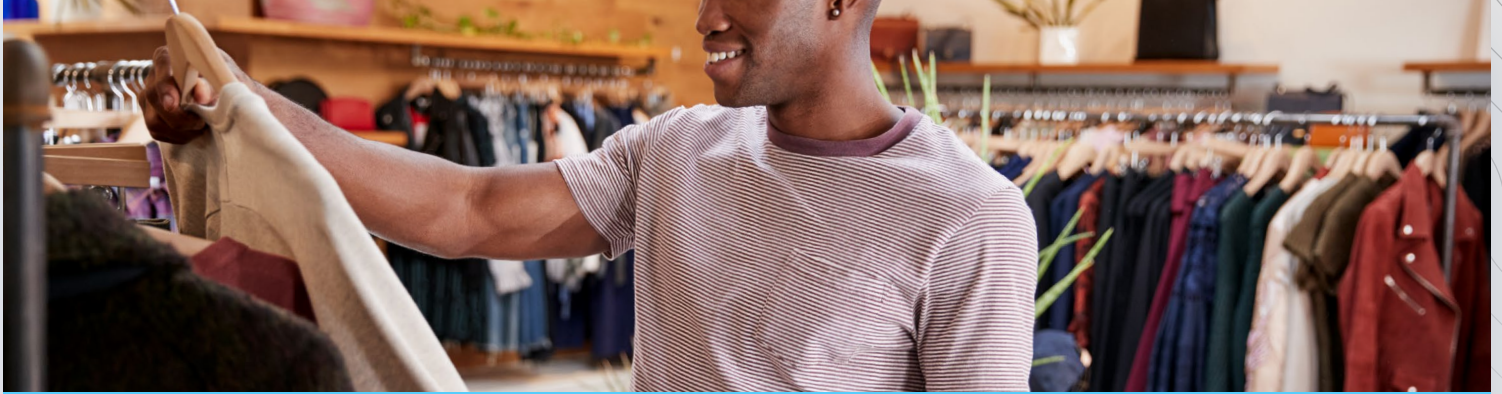
What You Need to Know About Recovery

One of the most important things you can do in the time leading up to your top surgery is to set yourself up for a successful and comfortable recovery. It will only be about two weeks before you're able to start moving back toward your normal activities. If lifting heavy objects is part of your daily life's activities it could be as long as 6-8 weeks.

The First Steps

The first thing you'll want to do is to figure out your support system. Who can you call on for help when you're feeling too tired or sore to do much for yourself? An ideal situation would be to have someone





live with you for the first few days. Someone's who's willing to help change your bandages, check your drains, bring you food, and assist you in cleaning or changing your clothes. Multiple caretakers can take turns, of course, on this journey to help you heal.

Beyond that, anyone who's willing to run an errand, bring over a meal, or just send you a supportive text can be part of your recovery team. Will someone:

- Accompany you to your surgery and bring you home after?
- Pick up your pain medication at the pharmacy?
- Help to care for your pets or kids, if you have them?

An organized friend or family member can help by creating a schedule of helpers for you and following up to make sure everyone does their part.



To help reduce bruising and swelling, introduce pineapple into your diet two weeks before your surgery.

You'll also want to make sure you're financially prepared and that your employer understands your needs. If you work at a desk job, you might only need to take two weeks off, but if your job involves lifting or other physical labor, you might need several. It's also helpful to make sure they know that you could need a sick day here or there if you're having a rough time after you return to work. Save up enough money to cover your living expenses for the time you're planning to be off, plus some extra as a cushion (unless you have someone in your life who can support you). This is the piece that will probably take the longest to prepare.

Right After Surgery

Your actual recovery starts the minute you're able to leave the outpatient facility after your surgery. First things first: are you going straight home, or do you need to make reservations at a nearby hotel for a night as you will need to return to the office early the next morning. You will need to have someone drive you as you are not allowed to take taxis or ubers. It is not safe for you to be in an altered state and trust your care to a stranger. Make sure you bring a small, soft pillow to put between your chest and your seat belt strap, and make sure that you've packed a button-down or zippered shirt that you can put on without lifting your arms.

Regardless of the type of incision you receive for your surgery, your recovery process will be similar.

- You'll have tubes inserted under your arms to drain fluids, and those will need to be emptied and checked.
- You will not unpack the vest for the entire first week and cannot shower during this week - sponge baths it is!
- You'll be given a chest compression garment to wear at all times to minimize swelling.
- All prescriptions are provided to you prior to your surgery. You are asked to bring them with you on the day of your surgery.

The First Few Weeks

The first two weeks of recovery will be the most intense. You'll want to have comfortable places prepared to rest during the day and sleep at night—and you'll need to sleep on your back. You won't be able to shower, so you'll need to rely on sponge baths and baby wipes to keep clean. Most of your recovery time should be spent resting, but we suggest you take some brisk walks to get you up and moving.

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You won't be able to lift your arms very high, so make sure anything you need is within reach and that you have plenty of shirts that don't need to go over your head. The level of sensation in your chest may vary, from feeling nothing at all to feeling tingling, itching, or even pain. At this time, it's crucial that you follow every instruction your surgeon's office gives you to the letter, especially checking your drains and incisions for anything unusual.

Many patients return to school or work after their second week. In your third week of recovery, you may feel like your old self and can lift as many as 15 pounds. You might also be able to go back to work if you have a job that isn't physically demanding. Still, your range of motion will be limited, and your incisions will still be healing. When you're home, you'll probably still need more rest than usual, and getting help with food or housework will make this stage of recovery much easier.

Later in Your Recovery

After about six weeks you'll be pretty well-recovered and able to resume most (if not all) of your regular activities again, including heavier exercise and lifting your arms. Now you get to enjoy picking out some new clothes that fit your new silhouette! From roughly week three to week eight, you can also decide how you feel about scars. Some trans people like having visible scars and feel proud of them, while others prefer to minimize them by using things like cocoa butter and vitamin E oil in conjunction with silicone - it helps to break down the scar tissue to replace thinner tissues - once the incisions are healed enough to do so. There's no one right answer-- it's up to you. The important part is that you've made it through your surgery and recovery, and you can celebrate having the body you've dreamed of!

Let ACPS Help You Continue Your Transition

Getting your top surgery is the biggest step you can make in your transition. You now feel, and look, like your true self! To help you complete your transformation, there are a couple more procedures you could look into.

- **Facial Masculinization:** The process of transforming feminine facial features to have

more of a masculine appearance. These procedures manipulate the bone and soft tissue of the face, such as changing the appearance of these facial features:

- Hairline
- Browline and Forehead
- Nose
- Lips
- Jaw and Chin
- Adam's Apple
- Facial Hair
- **Body Masculinization:** This is the process of using liposuction to remove fat from specific targeted areas to reduce the appearance of feminine curves. Usually around the waist and hips, many patients choose to do this at the same time as their top surgery. After healing from your top surgery, if you feel you would like more definition around your pectoral and abdominal areas, you can receive liposuction there as well.

The completeness of your transition is for you to decide. Many people stop at just the top surgery procedure. For some people, they choose to continue their transformation with any number of these procedures.

Looking for Support?

Sometimes the transition journey can feel lonely, but there's a big trans-supportive community accessible via the internet that can help. Here are some resources you might want to explore:

- **Trans Lifeline:** Staffed and run entirely by trans people, this organization gives out microgrants for transition-related issues and also has a support hotline and blog with news and resources.
- **Transbucket:** A site that allows trans people across the spectrum to get information on health services, especially gender-affirmation surgery. This website includes user-uploaded before and after photos of their top surgeries.
- **Planned Parenthood:** Don't let the name fool you-- PP's services are about so much more than reproduction. In the past year, they've made a large effort to expand healthcare services to trans patients, including offering hormone therapy. Note that services may vary by location.



- **[National Center for Transgender Equality:](#)** Founded by transgender activists, this broad-reaching organization offers legal aid, help with insurance and health care, family resources, and links to help with everything from shelter, to incarceration, to immigration.
- **[The Facebook Trans Alliance:](#)** A private Facebook group currently over 27,000 members strong, for transgender people and trans allies to support each other, share experiences, and build a community.

What to Ask Your Doctor Before Surgery: Some Top Tips

When you're gathering all your information before your surgery, it's no time to be shy! Ask your doctor absolutely anything that you're wondering about, and ask for more explanation or details on anything you don't understand. This is your body, and it's a big, permanent change. You should have all the answers you need to feel good about it.

Here are some things you might choose to ask about during your consultation, and why they matter:

1. **Can I see before-and-after photos of people with bodies similar to mine?** You should be comfortable knowing that your surgeon is familiar with your body type, and you'll get a better idea of what your body will look like post-recovery.
2. **What kind of payment arrangements can I make for my surgery costs?** You probably know before the consultation whether your doctor takes insurance for surgery or not. If not, you can ask to go over any financing arrangements they can help you make.
3. **Will I have to go off T?** If you've been taking testosterone, you should know whether your doctor expects you to stop. Some do and some don't. If they do, make sure they inform you about the effects that it will cause, including mood swings.
4. **What changes do I need to make to my diet and lifestyle?** You'll probably be told to cut back on sodium to reduce swelling and to quit smoking because smoking slows healing. But it's worth giving your doctor a full picture of what you eat and how you live so that nothing gets overlooked.
5. **What kind of pain or sensation should I expect while recovering?** It may feel scary to think about being in pain, but you want your doctor to be very honest about the range of possibilities so that you know what's normal and what should prompt you to call their office for a checkup.
6. **How gross is my recovery going to get?** If you've never had major surgery or injury before, you may only have a vague idea of what your body might look like during recovery. You should have a good idea what you can expect to see, how much fluid is

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normal, where you might see blood, and anything else that could be alarming, even if it's normal.

7. **How will my movement be restricted?** Be sure you're clear on what you can and can't do at every stage of recovery. Your doctor can point out things to change in your home that you might not have thought of, such as how high dishes are stored, or how to arrange your bed to make sure you sleep on your back.
8. **How should I manage any pain?** You should know beforehand whether you'll get a prescription for pain medication but also ask about over-the-counter products or other techniques, such as ice packs or better positions that will keep you comfortable. Your doctor might prefer that you mentally check off certain criteria before you turn to your prescription.
9. **What will my nipples look like, and how will they feel?** Different types of incisions affect the nipples differently. Ones that preserve the nipple stalk usually leave more sensation than ones that require nipple grafts. Look at plenty of photos of people who've had your type of surgery, and ask about how the size or shape of your areolas and nipples might change.
10. **What kind of scarring can I expect?** Think about how visible you want your scars to be, and make sure your doctor supports what you want. They should give you a realistic idea of what you'll have, both if you take measures to minimize your scarring and if you don't, and talk with you about ways to achieve what you want.

11. **What kind of emotional experiences might I have?**

It's very normal to have a wide range of emotions throughout this process-- fear, excitement, worry, joy, and even sadness. It can be a little overwhelming to think about how permanent this change is, even if you've wanted it very badly. Recovery can be draining and may leave you feeling more on edge than you expected. Find out what other patients have experienced, and what prompted those feelings. Ask what kind of emotional support you should plan to have in place.

12. **How should I care for my body during recovery?**

You'll get a very detailed recovery plan from your surgeon, but make sure that you really understand it and know how you'll follow it (by preparing and asking for help). Don't be afraid to ask about anything that you don't see described, whether it's dietary, how much water to drink, when you can have alcohol, or if any other health conditions you have will affect recovery.

13. **What do I do if I need help or advice after surgery?**

Know what's available to you through your doctor's office. What can they advise you about? When do you absolutely need to call them (when something isn't right)? Can they recommend other resources to you if you need them?

Ask all your questions before your surgery is scheduled, when you have plenty of time to get the answers you need. You'll avoid making an unexpected discovery when you don't have time or options to handle it, and you'll feel much better and more confident about your decision to get your long-awaited surgery.



What Makes Dr. Beverly Fischer and ACPS the best?

The Advanced Center for Plastic Surgery features a fully equipped, state-of-the-art practice, maintaining an in-house operating room complete with registered recovery nurses, an extended hour recovery suite, and an all-female staff dedicated to pampering patients throughout their stay. Our team is dedicated to making procedures as pleasant as possible by listening to patient needs, providing a spa-like atmosphere, and administering the utmost care during and after treatments.

As one of the top surgeons in the United States, Dr. Fischer performs both the double incision and periareolar (keyhole) procedures which she has perfected in her 20 years working with the FTM community.

At the [Advanced Center for Plastic Surgery](#), we understand how difficult this transition can be for the patient; emotionally as well as physically. We are dedicated to making this procedure as pleasant as possible.

Our staff is excited to bring our healthcare expertise to the expanding transgender community and help our patients become who they were truly meant to be. It is a wonderful feeling to see the smiles on our patients' faces when their vests are removed after surgery. As they look down at their new chest, tears of joy are shared by all. At the Advanced Center for Plastic Surgery, we understand how emotionally and physically difficult this transition can be. We are dedicated to making this procedure as life-affirming as possible.

Contact us today to schedule a consultation and to begin your journey towards your true self.



Quotes from Top Surgery Patients

Do your research on the surgeon. Some surgeons do not showcase fat bodies because we are "more to work with." Some surgeons make you lose weight. Stand your ground around fat-shaming doctors. If you do not like what the doctor is saying, tell them so. — P.K.

Cocoa butter with vitamin E mixed with tea tree oil is amazing for scars. — A.S.

Keep everything at waist level or lower. Buy body wipes, get a detachable showerhead, and, ideally, have someone help you wash your hair. — D.B.

Walk, walk, walk! Go on walks as soon as you're able. Go outside, move around! Best advice I was ever given. As soon as I could walk, I saw SO much more improvement! — E.B.

Most of the things I found online focused so hard on scar reduction. I had Double Incision, which does tend to leave pretty prominent scarring. I love my scars, I ADORE them, I think they're the sexiest part of me. I wish more surgeons would listen when some of us say that we like them! (Sidenote: I even got a tattoo to accentuate them!) — E.B.

I didn't have much feeling at all [in my nipples] immediately after surgery and for probably 9-12 months after. I started to regain some sensation, along with phantom itching and hypersensitivity to touch, and it was definitely affected by temperature, texture, etc. I think it would have been more realistic to say that I could expect for the sensation to go through a healing process and a number of changes, rather than that it would be gone completely. — N.W.